

Children of Divorce Who Refuse Visitation

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In the United States, more than one million children experience the divorce of their parents each year. The majority of these children (85% to 90%) will reside primarily with their mothers; and their fathers, in general, will have visitation rights (Glick, 1988). Estimates vary of the extent to which, for whatever reasons, visitation rights are not exercised, with the result that the child no longer has any contact with the nonresidential parent. In their national study, Furstenberg and his colleagues estimated that in almost one-half of divorcing families, there was no contact between one parent and the child 2 years following the divorce (Furstenberg, Nord, Peterson, & Zill, 1983). More recent studies suggest the rate of failure to visit is somewhat lower, that is, one-tenth to one-third (Braver, Wolchik, Sandler, & Sheets, this volume; Bray & Berger, this volume; Maccoby & Mnookin 1992). It is not known whether these varying estimates reflect sampling biases or geographical and cohort differences.

Children's reluctance or refusal to visit a noncustodial parent has rarely been investigated in the prominent studies of divorce (e.g., Furstenberg & Nord, 1985; Hetherington, Cox, & Cox, 1982; Maccoby & Mnookin, 1992). Hence the contribution of the child to the nonresidential parent's diminished involvement or failure to maintain contact has not

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been adequately considered. In fact, it is probably difficult to estimate the extent to which disengagement results from voluntary withdrawal of the parent or from being pushed out or excluded by the child (as well as by the residential parent), because the dropping out is likely to be a subtle process of reaction and counterreaction to the mutual disappointment inherent in a failed relationship.

A small proportion of nonresidential parents apparently do not disappear from their children's lives without protest, as is evidenced when the child's refusal to visit becomes the subject of litigation in the family courts. In these cases, judges are called upon to arbitrate, while mediators and therapists are called upon to resolve the problem through negotiation and counseling. Police may be asked to enforce court-ordered visitation between a reluctant child and his or her parent. Within the polemics of court litigation, the residential parent is often blamed for a child's refusal to visit: The parent may be accused of aiding and abetting the child's noncompliance, of "brainwashing" the child on behalf of the parent's own agenda. This all results in a plethora of ethical, legal, and family dilemmas that are usually regarded as being extremely difficult to resolve. The key problems are, first, whether and under what conditions visitation should be encouraged, facilitated, forced, or denied; and, second, what the prognosis is for resolution of a problem, given alternative intervention strategies.

It is surprising that such a perplexing and serious problem as children's refusal to visit has received so little systematic attention by researchers. The purpose of this chapter is to propose some etiological factors that lead to a child's reluctance or refusal to visit a nonresidential parent, using as a database two samples of children who are the subjects of ongoing post-divorce conflict and litigation. It is not known whether these observations can be generalized to all families where the child is resisting visitation, because there are no systematic data from non-litigating families with which to compare these high-conflict families. Furthermore, inasmuch as the data analysis is exploratory, these findings are preliminary, and the explanations offered are theoretical speculations intended to stimulate more thorough investigation.

Previous Research and Clinical Observations

In previous studies and clinical reports, reluctance of a child to visit with a nonresidential parent has often been used interchangeably with,

and hence confounded with, parent-child alignment (or parent-child alienation). Distinctions need to be made between these two sets of phenomena. Reluctance to visit includes a broad range of observable behavior in which the child, for any reason, verbally or gesturally complains about and resists spending time with the nonresidential parent. The resistance may be manifested only at the time of transition from one home to the other, or it may involve intermittent or ongoing complaints about visits. In extreme cases, it can encompass a complete refusal to have any contact with the other parent. It is interesting to note that, among this broadly defined category of reluctance to visit, the child may or may not be hostile or negative to the parent he or she is resistant to visiting, although, in extreme cases, there is often expressed fear and negativity.

On the other hand, parent-child alignment and its counterpart, parent-child alienation, are defined as the child's making an overt or covert attitudinal or behavioral preference for one divorced parent and, to varying degrees, denigrating and rejecting the other parent. By definition, then, this phenomenon involves a negative, conflictual, or avoidant relationship between the child and the rejected parent, whether that is the residential or the nonresidential parent. In extreme cases of a strong alignment with a residential parent, the child usually refuses to visit with the nonresidential, alienated parent. Hence, reluctance to visit and alignment/alienation are empirically overlapping but distinct phenomena.

Only one community study of divorce has provided any detailed account of children's reluctance or refusal to visit. Wallerstein and Kelly (1980) studied 131 children from 60 mother-custody families in one county in Northern California at the time of filing for divorce, with follow-ups 18 months and 5 years later. This sample was not considered to be a high-conflict litigating group. The researchers' observations were that the majority of these children were eager to visit their non-custodial fathers and often wanted more time than the usual every-other-weekend visits allowed. Those children who had infrequent visits longed for more contact and were often painfully hurt by the apparent lack of interest shown by their fathers. However, a minority, about 20% of the 131 children, were "in considerable conflict about the visits" (p. 144) and another 11% were "genuinely reluctant to visit" (p. 146); most notable were those between 9 and 18 years of age. The reasons varied: A number of children appeared to have empty, ungratifying relationships with their fathers; they did not have a warm or secure attachment to him. Visiting in the father's home was lonely, boring, alienating, and

sometimes anxiety provoking; he did not comfort, soothe, or provide for their interests. Others appeared to be responding angrily in counter-rejection to an uninvolved father.

The authors of this study, however, attributed the reluctance to visit among a subset of 25 (19%) of these children to an extreme identification with one parent, referred to as "an alignment." This alignment was defined as "a divorce-specific relationship that occurs when a parent and one or more children join in a vigorous attack on the other parent" (p. 77). The alignment was seen to be fed by an angry parent who felt rejected, betrayed, and often abandoned for another partner by the separating spouse. Parent and child shared moral outrage over the deserting parent's conduct, and this evolved into "a complexly organized strategy aimed at harassing the former spouse and sometimes at shaming him or her into returning to the marriage . . . the unspoken agenda was revenge" (p. 78).

In the Wallerstein and Kelly sample, twice as many children united with the mother as with the father, and most of the aligned children were in the 9-to-12-year age range. While alignments with the noncustodial parent did not appear to last past the first postseparation year, maternal alignments were remarkably stable through the 18-month follow-up. This is possibly because all of these children were in primary custody of the mother. Children in these alignments were clinically assessed to be less psychologically healthy; their mothers were disturbed, angry women, who appeared to be using the child's allegiance in a campaign to ward off their own depression. Cross-gender alignments appeared to be most common.

Gardner (1987), whose clinical practice largely involved court evaluations on behalf of parents litigating custody and visitation of their children, coined the term *parent alienation syndrome* to describe the phenomenon of children's stubborn refusal to visit. He estimated that 90% of protracted custody conflicts involve this syndrome, in which the child is preoccupied with deprecation and criticism of a parent, which may be exaggerated or unjustified. Gardner believes that the etiology of the disorder is predominantly with the behavior and attitudes of the aligned parent, usually the mother. The mother is either involved consciously in a systematic programming of the child to denigrate the father or is unconsciously transmitting her own angry, hurt, humiliated, vengeful attitudes to the child.

Gardner does acknowledge that child attributes partially account for the condition. He notes that some of these children are basically more

psychologically bonded with the aligned parent and become even more so as the parental conflict threatens that bond. Other children are actually afraid of the intensity of one parent's rage and align with that parent through fear of being rejected or abandoned themselves. Fear of loss of love hence underlies an anxious attachment to the aligned parent. Gardner has not considered age and gender effects in such alignments, though he does make passing reference to age-appropriate Oedipal conflicts that can exacerbate the problem. Other "situational factors" are noted; specifically, primary residence with the aligned parent is seen to consolidate the alignment.

Gardner recommends radical treatment in extreme cases of the parent-alienation syndrome by forcibly removing the child from the custody of the aligned parent and placing him or her with the "hated" other parent. When the conflict is played out in the courtroom, where attorneys and therapists are involved in litigation of these cases, this radical intervention stance has resulted in the major portion of the blame for the problem being placed upon the parent who is believed to fuel the child's alienation. That is, less attention is being paid to what the child brings to the situation, whereas the hated parent is viewed entirely as the victim.

Method

Two separate studies were undertaken of divorcing families who represent the more ongoing and entrenched disputes over custody and visitation. The first sample consisted of 80 divorcing parents disputing custody and visitation of 100 children (ages 1 to 12 years), about which we have published extensively elsewhere (e.g., Johnston & Campbell, 1988). They were referred by four family courts in the San Francisco Bay Area for counseling and mediation between 1982 and 1984. The parents had either failed to reach agreements in court-mandated mediation, or they were still disputing after a stipulation by the parties or an order imposed by the court. The sample was multiethnic: 64% Caucasian, 13% Hispanic, 8% African-American, 8% Asian, and 8% other. Socioeconomic status was varied and they had individual low-middle incomes (median \$10,000 to \$15,000 per annum). The parents had been separated, on average, for more than 2 years after a mean marriage duration of almost 7 years. Six percent had never been married to each other. Almost one-third were involved in post-decree litigation.

The second sample comprised 60 divorcing parents with 75 children (ages 3 to 12 years), who were referred from two family courts in the San Francisco Bay Area during 1989-1990 because of violence between the parents and/or ongoing conflict of a nonviolent kind over custody and visitation (Johnston, 1992). On average, parents had been separated for more than 3 years after 8 years of marriage. Fifteen percent had never been married to each other. Half were involved in post-decree litigation. The ethnic composition of this sample was 80% Caucasian, 3% African-American, 8% Hispanic, 3% Asian, and 5% other. Socioeconomically, they were very diverse, with median individual incomes of \$18,000 to \$25,000 per annum.

In the first study, 56% of the children were in the physical custody of their mothers, 14% were in father custody, and 30% were in the joint custody of their parents. Children in mother custody spent an average of 5 days per month and those in father custody spent an average of almost 7 days per month visiting the noncustodial parent. Those in the sole custody of either parent made an average of one to two transitions per week. Children in joint custody spent an average of 12 days each month with the least-seen parent and made two to three transitions each week between parental homes.

In the second study, sole physical custody to mother was in effect for 57% of the children, who saw their fathers on the average of 6 days each month and made two transitions each week between parents. Sole father custody was in effect for 7% of the children, who spent a mean of 9 days per month with mother and made one transition each week. Thirty-six percent of the children were in the joint custody of their parents, and they had contact with the least-seen parent on the average of 15 days each month and made two transitions between parental homes each week.

Procedures and Measures

In both samples, parents were interviewed separately at intake to obtain a full history; were administered a battery of standardized measures; and were seen in structured observation with their children, all of which has been described in detail elsewhere (Johnston, 1990, 1992). Children were also interviewed separately and assessed with standardized projective measures. Subsequently, all family members participated in counseling sessions, amounting to a total of about 25 hours of direct contact with the clinician per family over a 3- to 6-month period.

Parents in both studies evaluated their children, using the Child Behavior Checklist (CBCL) (Achenbach & Edelbrock, 1983), and evaluated the interparental relationship, using the Conflict Tactics Scale (CTS) (Straus, 1979). In the second study, the parents' own emotional dysfunction was assessed, using the Brief Symptom Inventory (BSI) (Derogatis & Spencer, 1982), and the teachers evaluated the children, using the Teacher-Child Rating Scale (TRS) (Hightower, Work, Cowan, Lotyczewski, Spinell, & Guare, 1986). Clinicians had the opportunity to evaluate the children, parents, and parent-child relationships in both studies, using factor-derived clinical rating scales (CRS) (Tschann, Johnston, Kline, & Wallerstein, 1989).

Two specific measures were used to assess children's resistance to visitation and the kinds of alignments children had with their disputing parents. The "Child's Reactions to Transitions Between Parents" was a 21-item checklist of symptoms that are commonly manifested among children in response to moving between parental homes. Four of these items involved resistance to visitation: (1) separation problems, clingy; (2) whiny, crying, fretful, weepy; (3) verbally resistant, complains about leaving/coming back; and (4) physical resistance, screams and holds on, won't leave, hides. In both studies, mothers and fathers were interviewed at intake by the clinician and asked about their child's current reactions to transitions. The clinician classified parents' responses using the checklist.

In the first study only, the counselors rated the child's attitude and behavior towards the disputing parents in terms of five possibilities: (1) acceptance of both/avoidance or preference; (2) temporary reactions; (3) shifting allegiances; (4) loyalty conflicts; (5) alignment. In both studies mild and strong alignments were distinguished. Two independent raters classified the responses, and any discrepancies in their judgments were resolved by discussion and consensus among three clinicians.

Principal Findings and Discussion

Children's resistance or refusal to visit a nonresidential parent after separation and divorce is an overt behavioral symptom that can have its roots in multiple and often interlocking psychological, developmental, and family systemic processes. Six different themes among children who are reluctant to visit are described here with accompanying empirical

evidence. These are: (1) the child's basic anxiety about separating from the primary attachment figure, especially when parents are overtly conflictual with one another; (2) the child's limited cognitive capacity to be aware of both divorcing parents' opposing viewpoints and feelings, so that an alignment is a resolution to painful loyalty conflicts; (3) the intensity and longevity of parental disputes, which also make alignments more likely; (4) the child's inability to extricate his or her feelings and ideas from an emotionally distressed residential parent; (5) the child's exposure to traumatic emotional abuse and physical violence between parents; and (6) the child's sense of counter-rejection and retaliation by the rejected parent and others. It is interesting to note that the first two of these themes are developmentally appropriate responses of children. The next three themes are related to pathological parent-child and family relationships. The last theme is a tertiary, systemic process, a compounding of the problems that may arise from any one or more of the first five processes. In the analysis and intervention with any one case, it is important to consider that the child's resistance or refusal to visit can be, and often is, multidetermined.

Normal Separation Anxiety in Young Children

In both studies, which included only children 12 years of age and under, there were very high levels of resistance to visitation manifested in symptomatic behavior at the time of transition from one parental home to another, as reported by both parents. Two findings are noteworthy here.

First, younger children were markedly more resistant compared to older children, as shown by significant correlations between age and the resistance measure (see Table 6.1). Specifically, younger children were likely to manifest more separation anxiety when leaving either parent than were older children. However, younger children in general were likely to manifest more whining, crying, verbal complaints, and physical resistance to visits when separated from their mothers, compared to their fathers; that is, these children resisted transitions to the father, whereas reluctance to return to the mother was rare. There were no gender differences, except that girls tended to be more physically resistant than boys when leaving their fathers. However, the relatively small sample sizes may have precluded establishing statistical significance.

Second, there was more resistance to visitation among children in families where there was more overt verbal and physical aggression

between parents. This was shown in significant correlations between the CTS scores and the resistance measure and also by the observation that resistance to visitation was generally higher in the second study, which was characterized by more severe physical violence compared to the first study (see Table 6.1).

The primary explanation for these findings—that resistance to visitation occurs more frequently among younger children mostly irrespective of gender—is that young children are more likely to react with anxiety and to protest being separated from the parent with whom they have a primary psychological attachment, and that parent is more likely to be the mother. The transition from one parent to the other commonly sets off developmentally expectable anxieties about safety and survival, especially among children younger than 3 or 4 years, who have not yet internalized an image of the primary attachment figure (Bowlby, 1969; Main, Kaplan, & Cassidy, 1985); that is, they cannot for any length of time visualize or keep in mind a memory of the absent parent, so that visitation to the nonresidential parent creates separation or abandonment anxieties. Children of this age also have not obtained object constancy (Mahler, Pine, & Bergman, 1975); that is, they do not have a concept of self that is independent or separate from the primary parent. Instead, the young child's primitive affective-cognitions of human relations are of two kinds: There is the good, gratifying parent-me and the bad, frustrating parent-me; it is these combined images that are split off from one another. The threat of separation from the gratifying mother or primary attachment person, necessitated by the visitation schedule, activates the opposite, negative cognitive-affective experience, and the child feels frustrated, angry, bad, and alienated. These feelings are also anxiety-provoking if not frightening. Children older than 3 or 4 years may continue to have difficulty if they have had repeated distressing separations and maintain an anxious attachment to the parent. It is also possible that children under the ages of 4 or 5 do not have a sufficient understanding of the concept of time (Piaget, 1960) and, for this reason, are confused about the particular visitation schedule. Consequently, they are anxious about when they will be reunited with the primary or residential parent.

Younger children's resistance to leaving their parents may also reflect an Oedipal theme. It has been commonly observed that from about 4 through 6 years, boys become libidinally or sexually attracted to their mothers and girls to their fathers, and both are competitive with the same-gender parent. Parents' separation and divorce offer the possibility

Table 6.1 Resistance to Visitation* by Age of Child

	<i>Number and Percent of Children</i>				<i>Total</i>
	<i>2-3 years</i>	<i>4-5 years</i>	<i>6-8 years</i>	<i>9-12 years</i>	
Study No. 1 <i>N</i> = 92	17 (74%)	15 (60%)	12 (63%)	14 (56%)	58 (63%)
Study No. 2 <i>N</i> = 63	—	15 (100%)	14 (70%)	16 (57%)	45 (71%)

NOTE: *Resistance to visitation includes separation problems, verbal complaints, and physical resistance to leaving on visits.

to children that their fantasies of possessing the mother or father could be realized. This arouses conflicts in children, anxieties about their impulses, and fears of reprisal from the same-gender parent, which may manifest in resistance to transitions between parents.

The fact that, in both studies, resistance to visitation at the time of transition between parents was greater when there had been ongoing conflict and overt aggression between parents suggests that fright engendered by overt parental quarrels may contribute to the child's resistance to visitation. Conversely, parents are more likely to be worried and dispute with each other if the child is symptomatic and reluctant to make the transition between parental homes. It appears less likely that parents' emotional dysfunction contributes to children's resistance to visitation that is manifested at the time of transition. In these studies, resistance was unrelated to the parents' degree of emotional disturbance (as measured by the BSI); neither were children who resisted visitation seen to be significantly more disturbed (as measured by the CBCL and the TRS) than those who did not resist. However, many of the high-conflict parents in this litigating population were ambivalent or skeptical of the value of visitation, especially when the child was symptomatic and resistant at transitions; these parents were not well suited to soothing the child and making the child feel safe and competent in handling the changes. The fact that children were often symptomatic at transitions but were not seen as being significantly disturbed, in general, supports the view that resistance to visitation is a developmentally expectable divorce-specific separation anxiety, which is made more intense by overt conflict between parents.

The Child's Cognitive Understanding of Parental Disputes

Reluctance or refusal to visit a nonresidential parent was found to be more common among children who had made an alignment with the residential parent. Alignment has been defined as occurring when the child, to varying degrees, shares the attitudes and opinions of the aligned parent and avoids or actively rejects the other parent. The most striking findings in this respect indicated that older children were significantly more likely to be in an alignment compared to younger children; that children were more likely to be aligned with the parent with whom they spent the majority of their time (usually the mother); and that boys were more likely to be aligned than were girls.

Figure 6.1 shows the age-specific attitudes and behavior of children in response to both disputing parents in the first study. Note that temporary reactions, which were defined as affective and behavioral distress in the immediate presence of disputing parents and acceptance of both parents at other times, predominated among 2-3-year-olds, was less frequent among 4-8-year-olds, and was absent among 9-12-year-olds. The incidence of shifting allegiances, defined as inconsistent preferences for first one parent and then the other, with corresponding swings in positive and negative affect, were most frequent among the 4-5-year-old group, less frequent among 6-8-year-olds, and relatively infrequent in the youngest and oldest children in the sample. Loyalty conflicts, defined as affective ambivalence and distress about hurting either parent, were highest in incidence among the 6-8-year-olds and were less frequent after that age. Alignments, which were defined as verbal and behavioral preference for one parent over the other, either overt or covert, showed an increased frequency with age in this sample, with three-fourths of the 9-12-year-olds in alignments, in contrast to only about one-tenth of the 2-3-year-olds. These findings were based on ratings by the clinicians who counseled the children in the first study for several months. Two-thirds of the children could be easily classified in one of the primary categories. The remaining third had mixed responses during the counseling period, especially the older children, who wavered between loyalty conflicts, alignments, and attempts to avoid a preference for either parent.

Age at separation varied greatly among the children in this study, so that clinicians were able to obtain from both mothers and fathers a

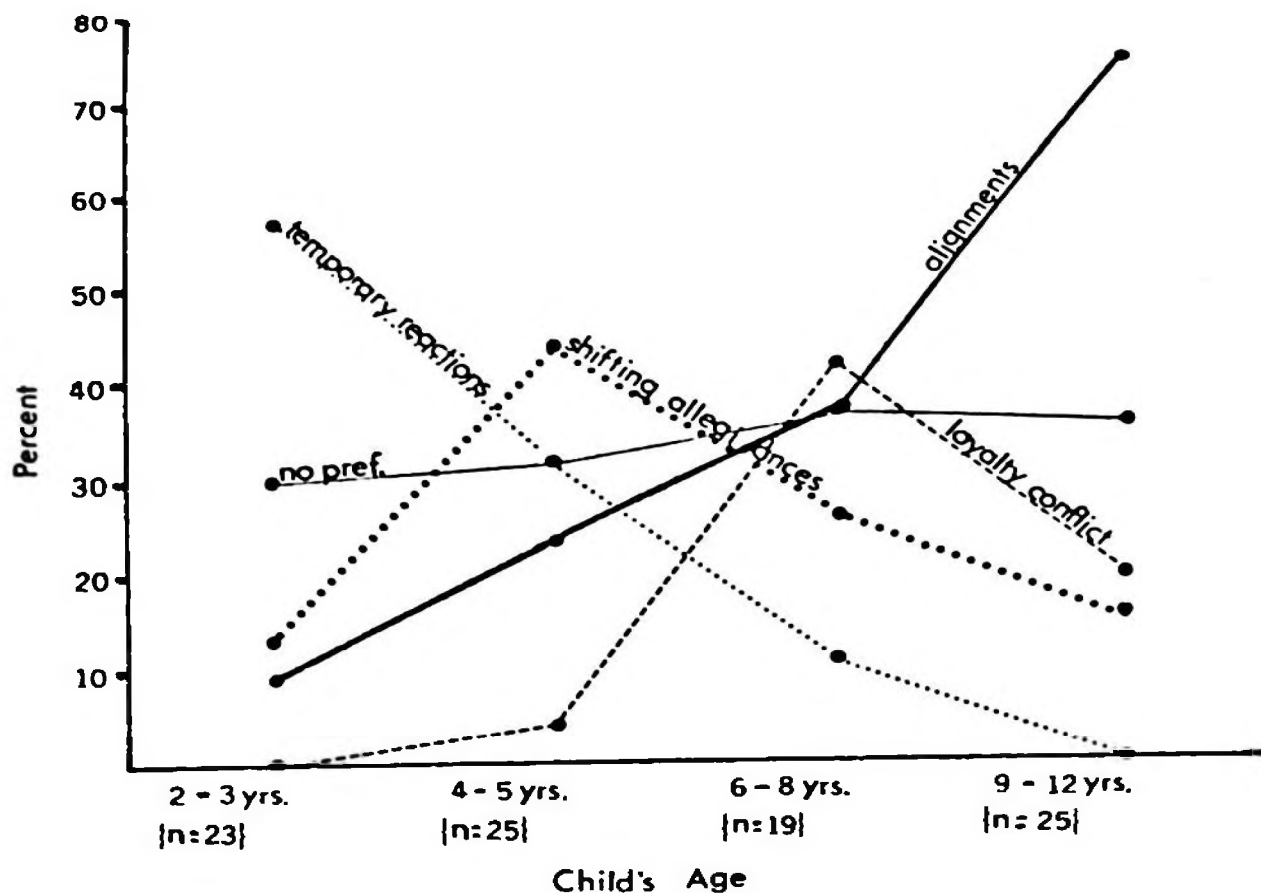


Figure 6.1. Children's Attitudes Toward Their Disputing Parents

SOURCE: Johnston, J. R., & Campbell, L. E. G. (1987). Instability in the networks of divorced and disputing families. *Advances in Group Process*, 4, 243-269. Reprinted with permission of JAI Press, New York, NY.

history of the change in children's attitudes and behavior towards their disputing parents. Clinicians were also able to follow about one-fourth of this sample over the decade that has elapsed since these data were collected. From these retrospective and longitudinal observations, there is reason to believe that the patterns in the findings were based on the children's growing and changing cognitive capacities to understand the disputes between their parents and their parents' attitudes to each other, and to infer their parents' attitudes to themselves.

To summarize, the expectable developmental trends for children in their attitudes and responses to their chronically disputing parents are temporary reactions (2-4-year-olds), shifting allegiances (4-7-year-olds), loyalty conflicts (7-9-year-olds), and alignments (9-12-year-olds). The case of a child followed for more than a decade illustrates these changes.

Christie was 3 years old when her parents separated. At this time, she showed temporary resistance to visiting her father on alternate weekends. She clung to her mother and cried, especially when her parents were overtly hostile toward one another at transitions. However, she quickly settled into the visits, as she was attached to the warm, loving grandmother who lived in her father's home. When Christie was 5 years old, her father remarried, and the hostility increased between her parents, mostly instigated by the new stepmother. During the next several years, Christie seemed to shift allegiances from one parent to the other: She told negative stories to both parents that aimed to please, placate, and confirm her parents' separate views. As she approached the age of 9, Christie seemed to become increasingly anxious, confused, and guilty about her divided loyalties. Unfortunately, the conflict between her two parents remained intense, and the child was increasingly pressured to take sides. When she was 9 years old, Christie entered into an alignment with her mother that gradually became entrenched. She became more and more covertly hostile toward her father and stepmother, complained about them, and tried to avoid visiting them. By the time she was 12 years old, she was overtly verbally abusive to her father and adamantly refused to visit, despite her mother's pleas that she had no choice "because the visits are court-ordered."

This intriguing pattern of developmental trends is largely explained by children's perspective-taking abilities in social relationships, in the context of a disputing social network (Johnston & Campbell, 1987). Social-cognitive developmental theorists (e.g., Flavell, Fry, Wright, & Jarvis, 1968; Piaget, 1965; Selman, 1980) have shown that children have an evolving capacity to hold in mind one perspective or more at a time, in relation to their own. They also have an advancing ability to differentiate self and others, in increasingly psychological terms and less in behavioral terms.

Early Preschoolers (2-4 years). Very young children are immediately reactive to witnessing overt parental conflict. This is so because their capacity to take a perspective in social relations is limited to a recognition of concrete and observable distinctions between people; they have little awareness that people can feel differently than they act. Further, at this age children are egocentric, in that they assume that others perceive and feel just as they do, and that they themselves cause the actions of others. Therefore, in response to their parents' conflict, these children seem to believe that parents are angry with each other

only if the anger is overtly demonstrated in some observable manner. These littlest ones experience tension and stress when they are in the physical presence of their actively hostile parents. At such times, they typically cry and cling to one parent and they may temporarily avoid and reject the other parent. As soon as they are alone with the rejected parent, they can rapidly change and behave as though there is no issue. When their parents converse amicably, they respond happily to both, appearing delighted at the truce ("Daddy likes Mommy 'cause he talks nice to her"; or, conversely, "Daddy hates Mommy 'cause he talks mean"). Note, however, that if left alone with an angry parent who is distressed by a fight with the ex-spouse, these little ones are likely to misconstrue the reason for the parent's anger and to feel they are to blame for the upset ("I made Mommy mad 'cause I made too much noise").

Late Preschool–Early School Age (4-7 years). Children at this age have a budding capacity to take another person's viewpoint. The child can now take one parent's perspective at a time, but not both simultaneously. Although they are better able to understand that parents have internal or subjective feelings different from their overt behavior, and that their parents' feelings may be different from their own, all feelings are seen as simple, unitary ones. Mixed or ambivalent feelings are difficult for them to comprehend. For these reasons, it is not uncommon, at this age, for children of high-conflict divorce to have unstable, shifting allegiances, first taking one parent's viewpoint, and later taking the other's. (At home with mother they hear and believe one story, "Daddy didn't pay Mommy any money"; at father's house they are quickly convinced that "Mommy wasted all the money.") They become easily confused and can excite concern and chaos in their parents by telling different stories to each. Likewise, these young children have very simplistic notions of how to mend the quarrel ("Daddy says he's sorry, so can he come back home now?"). It is not possible for them to understand that mother may feel differently about father's change of heart.

Early Latency Age (7-9 years). By this age, children have begun to develop the capacity for self-reflexive thinking ("I know that she knows that I know"). They can also simultaneously hold more than one perspective at a time, for example, both their parents' viewpoints. They can even imagine how their parents view them, though their capacities are still limited in this respect. At this age, children begin to recognize the existence of mixed feelings, and that they may continue over time. Hence, children may begin to make judgments about the sincerity of parents' behavior ("He says he's sorry, but I don't think he really means

it"). These new cognitive capacities mean that children of this age can experience acute loyalty conflicts for the first time because they can comprehend the complexity and incompatibility of their parents' opposing views. Furthermore, with their newly acquired self-consciousness and concreteness of operations, they are worried about how parents may view their actions ("Will Dad feel I don't love him as much as Mom if I spend more time with her?"). This may, in part, be an explanation for the considerable pain, sadness, and powerlessness typically seen in younger latency-age children in reaction to their parents' quarrels and divorce. In response, they want very much to be fair to both sides and to remain equidistant from each; they may try assiduously to avoid situations in which they are simultaneously in the presence of both parents, whether or not the parents are overtly fighting. Moreover, there is still a tendency to blame the self for parents' problems at this age (cf. Wallerstein & Kelly, 1980). This may be a defense against the perceived consequences of being angry at parents upon whom they are wholly dependent, or it may reflect the vestige of their younger egocentric perspective.

Late Latency Age (9-13 years). Loyalty conflicts in intensely disputing divorcing families do not appear to be sustained for very long by children at this age, probably because they are too painful and hence unbearable. Instead, children in later latency typically begin to make alignments with one or the other parent, and with varying degrees of intensity begin to exclude or reject the other parent. Many of these alignments waver between somewhat mild, secret preferences and wishes not to hurt or anger the rejected parent; or they may represent the child's attempt to maintain a distance and not get involved in the parental battles. A significant proportion of children, however, make strong alliances, these being overtly hostile, unshakeable stances in which the child may stridently reject and refuse to see or visit one parent.

The alignments seen at this age appear to result from a convergence of developmental and family-interactional factors: the child's capacity to conceptualize the whole system of conflictual relationships in the family; his or her tendency to adopt a polarized moral view of the situation; and pressure to take a more active role in the parental fight from family members who perceive the child as being "old enough to take a stand."

Early-Middle Adolescence (13-15 years). Our studies did not initially include adolescents, but a follow-up of the first sample of children, 2 to 3 years later, suggests that these alliances typically last several years

into middle adolescence. About that time, the teenager develops the capacity for third-person perspective-taking (a more objective stance, in which they can view each parent's position as well as their own from a greater distance and can make more independent judgments). Under the best of circumstances, this greater objectivity allows them to use their cognitive skills to withdraw strategically from the parental fights.

Unfortunately, it appears that a significant proportion of children are not able to do this, and remaining caught up in the parental fight is associated with their having more emotional and behavioral difficulties (Buchanan, Maccoby, & Dornbusch, 1991; Johnston, Kline, & Tschann, 1989). In general, boys are more likely than girls to be behaviorally and emotionally symptomatic in response to parental conflict and violence, a finding which is confirmed by a large body of research (Emery, 1982; Jaffe, Wolfe, & Wilson, 1990; Zaslow, 1989).

Intensity and Longevity of Parental Disputes

There are factors other than the child's age and cognitive perspective-taking ability that contribute to the formation of parent-child alignments, and in turn, to children's refusal to visit. First, our studies showed that alignments made by the older children were more common in those families where the litigation was chronic and the hostility between parents unrelenting. In fact, from both the retrospective histories of these children and from prospective longitudinal observations of those children who have been followed over time (as illustrated by the case of Christie, above), we have hypothesized that it is highly likely that children will move into alignments as they approach early adolescence, if the parental conflict is ongoing.

It is evident, however, in comparing the estimates of alignments in different samples, that when conflicts are overt and involve the children, and when the disputes are intense and prolonged, the children are more likely to submit to this alignment mode of defending and coping. Wallerstein and Kelly's (1980) community study of recently separated parents found that one-fifth of the children were in alignments; most of these were among the 9-12-year-old group and most of the alignments were not sustained. In the two studies described above, which involved custody and visitation disputes of divorcing families referred from the courts, almost one-third of the total sample of children were in alignments more than 2 to 3 years postseparation. Moreover, note that among the 9-12-year-olds, three-fourths were in alignments. Gardner (1987),

who acts as an expert witness in custody evaluations and trials, estimates that nine-tenths of the children he sees are in entrenched alignments, which he terms the *parent alienation syndrome*.

Contribution of Emotionally Disturbed Parents to Parent-Child Alignments and Children's Refusal to Visit

While the changes in attitudes and behavior toward disputing parents, shown in Figure 6.1 and described above, appear to constitute the general developmental trend, there is a great deal of deviation from these patterns. Some children seem never to separate psychologically from a parent in the first place, or they enter into alignments early on (at 7 or 8 years). Some try to remain loyal to both parents and avoid alignment or alienation by becoming withdrawn and distanced from both. Some children nurture mild, covert preferences for one parent; others enter into strong alliances with the parent who is perceived as "all good," while the "all bad" parent is stridently rejected and even persecuted. Moreover, children may align with a parent even if there is relatively mild estrangement and an absence of overt conflict between the divorced parents, which suggests that parental conflict is not necessary condition for the formation and maintenance of alignments.

To have a more complete understanding of the variation observed among these children, it is important to consider the intensity, consistency, and apparent irrationality of the parent-child alignment, and the degree to which the child has developed the capacity to psychologically separate (individuate) from his or her parent. Table 6.2 distinguishes between strong and mild alignments. A strong alignment is defined as a definite, consistent, overtly verbal and behavioral preference for one parent, together with rejection and denigration of the other. It is accompanied by affect that is unequivocally hostile and negative toward the rejected parent. A mild alignment is defined as a more moderate verbal and behavioral preference for one parent, often private or covert. It is accompanied by affect that is mildly negative and sometimes ambivalent.

As shown in Table 6.2, strong alignments were more common in older children than in younger: One-fourth to two-fifths of the children ages 9-12 years were in strong alignments. In these cases, the child consistently denigrated and rejected the other parent. Often, this was accompanied by an adamant refusal to visit, communicate, or have anything to do with the rejected parent. In extreme cases, the child's reality distortion and negative construal of the behavior and character of the

Table 6.2 Strong and Mild Alignments* by Age of Child

	<i>Number and Percent of Children</i>				
	<i>2-3 years</i>	<i>4-5 years</i>	<i>6-8 years</i>	<i>9-12 years</i>	<i>Total</i>
Study No. 1 (N = 92)					
Mild Alignment	2 (9%)	6 (24%)	7 (37%)	12 (48%)	27 (30%)
Strong Alignment	0 (0%)	0 (0%)	0 (0%)	7 (28%)	7 (7%)
Study No. 2 (N = 63)					
Mild Alignment	—	4 (27%)	6 (30%)	8 (29%)	18 (29%)
Strong Alignment	—	1 (7%)	4 (20%)	12 (43%)	17 (27%)

NOTE: *Mild alignment is defined as moderate verbal and behavioral preference for one parent, usually covert. Strong alignment is a consistent, overt verbal and behavioral preference for one parent together with rejection of the other.

nonaligned parent took on a bizarre quality. Strong alignments are probably most closely related to the behavioral phenomenon Gardner (1987) referred to as *parent alienation syndrome*, which typically creates considerable consternation among parents, mental health professionals, and the courts.

In our studies of high-conflict litigating families, the children who were in extreme alignments with one parent were likely to be viewed as more psychologically disturbed by mothers, fathers, teachers, and clinicians (as measured by the CBCL, TRS, and CRS). In addition, children made stronger alliances when the parents were more emotionally dysfunctional (as measured by the BSI). Note that strongly aligned parents were more likely to be mothers (or residential parents), and alienated parents were more likely to be fathers (or nonresidential parents).

This brings us to the fourth major factor contributing to children's refusal to visit, which involves the psychological health of the aligned parent and the nature of the relationship between the child and that parent. The theories that contribute to this explanation are object-relations theory (Kernberg, 1975; Kohut & Wolf, 1978; Mahler et al., 1975; Winnicott, 1971) and attachment theory (Bowlby, 1969; Main et al., 1985). This literature draws attention to the way in which psychological disturbance in the parent, especially borderline and psychotic conditions as well as anxiety and depression, can affect the child.

The early origins of disorders in attachment and separation are believed to occur among very young children (especially from 12 to 24 months), when the child is psychologically separating from the mother

and attaining a sense of object constancy and a separate self. Secure attachments, a sense of autonomy, and the beginnings of a separate self are believed to be the outcome of parenting by the primary caretaker that is empathic and emotionally attuned to the child's developmental strivings for independence and control. The parent must also be sensitive to the child's anxieties about survival, separation, and abandonment, which are a consequence of the child's tentative venturing out "into the world." The parent should know when to offer encouragement and applaud the toddler's autonomous efforts and when the child needs comfort, soothing, and constraints upon overwhelming stimuli and impulses. Graduated failure of the mother's special attunement to the child is developmentally appropriate as the child grows older, because it helps the child to internalize the mother-child relationship in order to gain an autonomous self. It also helps the child fuse the images of the "good and bad me" and the "good and bad mother" and thereby attain self and object constancy.

Separation and divorce for the parent is typically experienced as loss (with accompanying feelings of anxiety, sadness, and fear of being alone) and rejection (together with feelings of shame and failure). Divorcing individuals differ in their ability to manage and integrate these divorce-engendered emotions (Johnston & Campbell, 1988). Some especially vulnerable parents can become acutely or chronically distressed, anxious, or depressed. They may show increased characterological disturbance even to the point of psychosis. Such disturbed parents, especially mothers (who are usually the primary attachment figures), are unable to sustain the emotional attunement and responsiveness necessary to provide for or sustain the child's psychological separation. Instead, they may use the child on behalf of their own need for nurturance and companionship, or as an ally against the world. Children of such parents, in order to have their own needs met to any extent, have to reflect whatever the parent needs and wants. Consequently, they become vigilant and highly attuned to the parent and mold themselves to preserve this tie. In so doing, the child does not have the opportunity to experience and acknowledge his or her own separate feelings and ideas. The child fears that disappointing or abandoning mother, physically, emotionally, or ideologically, may result in being ignored, abandoned, rejected, punished, or even destroyed by the angry, depressed, anxious, or emotionally volatile parent. Alternately, sensing an apparent omnipotence in caring for a distressed parent, the child acts as though the parent's survival depends on his or her constant vigilance and caretaking. For these

reasons, the child may find it extremely difficult, if not impossible, to leave willingly for visits to the nonresidential parent, for fear of what might happen to the residential parent during his or her absence, or out of anxiety at disappointing and betraying that parent by "going over to the other side."

The Child's Exposure to Traumatic Emotional Abuse and Physical Violence Between Parents

Vulnerability to separation/individuation difficulties is not limited to young children. Recent developments in post-traumatic stress theory have shown that children who have witnessed traumatic violence between parents (Pynoos & Eth, 1986), those who have observed or been subject to terrorizing attacks by a psychotic parent (Anthony, 1986), those who have been threatened and physically or sexually abused (George & Main, 1979; Terr, 1981), and those who have been abducted by a parent (Senior, Gladstone, & Nurcombe, 1982) and/or fought over in bitterly contested custody disputes (Johnston & Campbell, 1988) can develop an extreme identification with the perceived aggressor or with the victim of the aggression. The theory in this domain is not well developed. One explanation is that traumatic violation of the moral order, of what should and should not be, especially if it involves physical injury or threat of destruction to self or loved ones, appears to exacerbate the psychological defense of "splitting" in the child, so that one parent (the violator) is viewed as "all bad" and the other parent (the victim) is seen as "all good." The child then tries to become one with the good parent and to reject all contamination by the bad one. Alternately, the child, with an awareness of helplessness, may identify with the powerful parent (the aggressor) and reject the one who is perceived as weak and vulnerable. Gender-specific identifications may also influence the formation of such alignments. In extreme instances of trauma, dissociation or a profoundly confused amnesic state may prevail (Gil, 1988).

Some intensely aligned children from highly conflicted divorcing families in our studies had been exposed to considerable trauma, especially emotional and physical abuse between their parents. As a group, these children demonstrated the more extreme reactions and symptoms. Physical violence between parents had occurred in three-fourths of both samples of high-conflict litigating families. In about one-sixth of the first sample and one-fifth of the second sample, beatings or threats with or use of a weapon had occurred, which many of the children had either

witnessed or heard about (Johnston, 1992). Some of these children had realistic fears about the dangerousness of a violent parent, particularly a battering father, and they resisted visitation because they did not feel safe with that parent. Alternatively, they did not feel it was safe to leave mother, home, or pets, perceiving these all to be vulnerable to attack by the violent parent. Other children became profoundly disturbed and entered into a state of *folie a deux* with an abused mother, with a narcissistically injured father, or with a paranoid parent, a state in which reality, fears, and fantasies about the excluded parent were inextricably entwined for the aligned parent and child.

Sometimes a child's alignment with one parent and refusal to visit the other appears to be partly rooted in early, barely remembered trauma of domestic violence. In the case of Christie, described above, it seems that she had never developed a secure attachment to her father during the first 3 years of her life in a home marred by his alcoholism and physical abuse. In fact, in counseling sessions she revealed she had "flashbacks" of traumatic scenes when she was an infant in her crib: She heard breaking glass, loud angry arguments, and her mother crying. Subsequently, although her father's drinking and violence had ceased she never really trusted him, and her anxieties were confirmed by her mother's obvious fear of this man.

Counter-Rejection by the Rejected Parent and Others

The final factor that contributes to the intensity of the parent-child alignment and the child's refusal to visit after divorce is the part played by the rejected parent and his social network. To date, this has seldom been acknowledged as a problem. In the studies described here, both parents and clinicians perceived less warmth and more hostility, anger, and distance in the rejected parents' responses to their children. That is, the more likely the child was to align with one parent, refusing to visit and rejecting the other parent, the more counter-hostility was generated toward the child on the part of the derogated parent.

Most rejected parents are not only hurt but highly affronted, even outraged, by the child's challenge to their authority and the lack of respect accorded them. Some try to reassert their parental position forcibly and coercively, which not uncommonly ends in verbal abuse, physical struggles, and assaults between child and parent; as a result, the child may sometimes run away. Other parents pursue the child relentlessly with a barrage of phone calls, letters, unexpected appearances at the

child's activities and functions, and through ongoing litigation. In these cases, the child's negative attitudes are denied and dismissed by the offended parent as simply "the other parent talking" or by declaring that the child has been "brainwashed." In response, the child is even more indignant at being so discounted. Preadolescents and adolescents, who cherish their emerging autonomy, are particularly angry when their own expressed opinions are ignored or invalidated.

The rejected parent's extended kin, friends, and community may become involved. Neighbors, the priest, or the father's therapist may be called upon to plead the father's cause. Grandparents may write guilt-inducing letters or may belittle and counter-reject the child as being "selfish," as having been "duped" by the other parent, or as being a "traitor" to the family. All of these shaming and guilt-inducing strategies invariably lead to more avoidance on the child's part. A child who is in the custody of the rejected parent is usually not able to tolerate this intense familial and social pressure.

At the same time the aligned child is stridently denouncing the rejected parent, he or she is usually hypersensitive to and hurt by the counter-rejection, and so the alliance is intensified. What becomes evident in these cases, from a clinical viewpoint, is that beneath all the overtly angry rejection and negativity, the aligned child is often confused and besieged by guilty feelings. The child longs pathetically for the rejected parent, wishes to be rescued from the intolerable dilemma, and seems to be continually testing, by more and more extreme, negative behavior, to prove how much the rejected parent does or does not care.

This is clearly illustrated in the case of 12-year-old Christie, who refused to visit her father. Christie was verbally abusive to her father and told him she would run away if the court compelled her to visit. Father retorted that if the court did not support his request, he would ask her stepfather to adopt her: He felt it was extremely unjust that he had to pay child support for a daughter whom he never saw! After this conversation, Christie became agitated and angry and punched a hole in the wall of her bedroom. Later, she expressed painful feelings of guilt, confusion, and hurt because of her father's rejection.

Implications for Research Policy and Practice

Parents of young children who resist visitation need help in soothing and making the child feel safe and competent in handling transitions

between parental homes. Use of transitional objects, bedtime stories that explain the divorce and the child's living arrangement, decorated calendars that help explain the time schedule, liberal use of the telephone to keep in contact with each parent, and the use of photographs to keep alive the image of each parent, can all be encouraged. It is important to ensure that parents protect the child from their disputes with each other, and that they carry out the transitions at a place that feels neutral and safe for each parent and comfortable for the child. If these measures do not decrease the child's separation anxieties, schedule changes that reduce the number of transitions the child makes between parental homes may help.

Special care needs to be taken to monitor the adjustment of children under the age of 3 years. These children are often highly reactive to separations from and transitions between parents. It is proposed that they are vulnerable to having their attachments disrupted in a significant way by separations that are continually stressful. In general, parents need to be advised on how children of different ages react to separations, how they understand the nature of parental disputes, and how they are likely to react to conflict. Parents may need counseling on how to respond appropriately to their children's concerns, in order not to exacerbate developmentally expectable separation anxieties, shifting allegiances, loyalty conflicts, and alignments by their own anxious or punitive responses.

Children who have been traumatized by witnessing family violence may need to be treated for post-traumatic stress syndrome, which involves reexperiencing and working through the traumatic memories in a safe, supportive, therapeutic environment (Pynoos & Eth, 1986), before they can (re)engage in a secure relationship with both the perpetrator and the victim of abuse. When there is ongoing threat of violence by a parent, when children have been sexually molested by a nonresidential parent (or believe they have been molested despite the absence of definitive proof), they need therapeutic support and help to reevaluate their relationship with that parent, and they need the protection of supervised visits. In extreme cases of parental abuse and violence, parent-child contact may need to be suspended or terminated. (See proposed guidelines for custody and visitation for children of domestic violence, Johnston, 1992).

We have found that children who have incomplete psychological separation from an emotionally or mentally disturbed parent need longer-term therapy, which should include the therapist's supportive counseling

relationship with both parents. It has been our experience that forcibly removing these children from the aligned parent and placing them in the custody of the rejected parent, as recommended by Gardner (1987), is a misguided resolution; it is likely to be not only ineffective but actually punitive and harmful because it usually intensifies the problem. Rather, the process needs to be one of effecting a gradual separation in a supportive, therapeutic environment. In general, the first step for the therapist is to advise the alienated parent how to empathically and patiently reach out without antagonizing or threatening the child. At the same time, a strong supportive relationship needs to be built up between the clinician and the aligned parent, thereby relieving the child of some of that burden. The therapist can then gradually decondition the child's phobic anxiety and manifest anger by acting as both a buffer against and a bridge to the alienated parent, while at the same time helping the child manage the fears and actual consequences of moving away from the aligned parent. The actual visitation time can be increased over several months, beginning with day visits that are short and protected by the presence of either the therapist, a relative, or an adult friend with whom the child feels comfortable. The duration of the visits can then be gradually lengthened to include overnights, first with, and later without, the presence of supportive others. When the child is caught in a *folie a deux* relationship with an extremely disturbed psychotic parent, the separation may need to be undertaken within the protective confines of an inpatient psychiatric unit or in a residential school for emotionally disturbed children.

There has been no systematic study of the vicissitudes of the visiting relationship between children of divorce and their nonresidential parents. The conditions under which it works well, to the gratification and benefit of the child, have not been distinguished from those in which it fails. Despite the fact that mental health professionals are recommending and courts are ordering visitation arrangements for thousands of children daily, there is yet a meager knowledge base to justify their decisions.

The findings reported in this chapter are tentative, based on simple correlations and clinical observations from relatively small samples of high-conflict divorcing families. The interpretations of these findings are also quite speculative, with theoretical ideas about separation-individuation, social-cognitive perspective taking, the effects of emo-

tionally disturbed parents, and the effects of trauma on children largely drawn from bodies of theory and research not directly related to divorce. As such, they comprise no more than hypotheses, which, it is hoped, will guide more systematic inquiry into the origins of problematic visiting relationships. In the same vein, the mental health and legal interventions proposed should be regarded as preliminary suggestions, based on the author's clinical experience and understanding of methods that appear to help. These, too, need systematic evaluation. What is clear is that there is a great need for research based on a developmental framework that considers the child's perspective of changing relationships in the post-divorce family.

The overall thesis of this paper is that children's resistance and refusal to visit a noncustodial parent have their origins in diverse and multiple psychological, developmental, and family system factors that require careful differential assessment by experienced clinicians. Interventions and legal policy need to be fashioned from a clear understanding of the many threads that contribute to the problem.

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